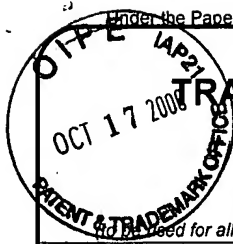


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/029,372
Filing Date	December 21, 2001
First Named Inventor	Sabbadini, Roger
Art Unit	1655
Examiner Name	Gitomer, Ralph, J.
Attorney Docket Number	LPT-3001-UT

ENCLOSURES (Check all that apply)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input checked="" type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
<input type="checkbox"/> Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____
<input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
* Transmittal (1 page)
* IDS (3) Statement (2 pages)
* Form SB08 (1 page)
* Form 2038 & Fee Transmittal (2 pages)
* Return Postcard (1 item) |
|---|--|---|

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name BioTechnology Law Group

Signature

Printed name

Daniel M. Chambers

Date

14 Oct '06

Reg. No.

34,561

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Daniel M. Chambers

Date

14 Oct '06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OTRE 1AP21
OCT 17 2006
PATENT & TRADEMARK OFFICE

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Fee is pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2006

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$180.00

Complete if Known

Application Number	10/029,372
Filing Date	December 21, 2001
First Named Inventor	Sabbadini, Roger
Examiner Name	Gitomer, Ralph, J.
Art Unit	1655
Attorney Docket No.	LPT-3001-UT

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
_____ - 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
_____ - 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets _____ **Extra Sheets** _____ **Number of each additional 50 or fraction thereof** _____ **Fee (\$)** _____ **Fee Paid (\$)** _____

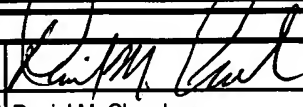
_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge), Filing fee for Submission of Information Disclosure Statement \$180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 34,561	Telephone 858-350-9690
Name (Print/Type)	Daniel M. Chambers	Date	1/4 of '06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Sabbadini, Roger
Serial No.: 10/029,372
Filed: December 21, 2001
Title: Compositions And Methods For The Treatment And Prevention Of Cardiovascular Diseases And Disorders, And For Identifying Agents Therapeutic Thereof

Examiner: Gitomer, Ralph, J.
Group Art Unit: 1655
Docket: LPT-3001-UT

INFORMATION DISCLOSURE STATEMENT (3)

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the enclosed material is brought to the attention of the Examiner for consideration in connection with the above-identified patent application.

Applicants respectfully request that the enclosed Information Disclosure Statement be entered, and the documents listed on the attached Form SB08A be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicants request that a copy of the SB08A form, initialed as being considered by the Examiner, be returned to the Applicants with the next official communication.

CERTIFICATE OF MAILING PURSUANT TO 37 CFR § 1.8:

The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop: AMENDMENT, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Daniel M. Chambers
Name

Date

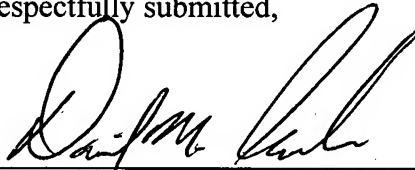
14 Oct '06
Signature

Also, Applicants respectfully request that in USSN 10/028,156, filed 12/21/2001 (now Patent No. 6,881,546, issued 04/19/2005), the form 892, mailed on 05/19/2004, also be incorporated and considered as part of the present application. As provided in 37 C.F.R. §1.98(d), copies of the documents are not being provided since they were previously cited by or submitted to the Patent Office in USSN. 10/028,156.

Pursuant to 37 C.F.R. §1.97(c)(2), Applicants have included the fee of \$180.00 as set forth in 37 C.F.R. §1.17(p). If any additional fees are due or overpayment, please contact the undersigned attorney at (858) 350-9690.

The Examiner is invited to contact the Applicants' Representative at (858) 350-9690 if there are any questions regarding this communication.

Respectfully submitted,



Daniel M. Chambers
Reg. No. 34,561

Date: 14 Oct '06
BioTechnology Law Group
527 N. Highway 101, Suite E
Solana Beach, CA 92075-1173
Telephone: 858 350-9690
Facsimile: 858 350-9691
dan@biotechnologylawgroup.com

(Use as many sheets as necessary)

Application Number	10/029,372
Filing Date	December 21, 2001
First Named Inventor	Sabbadini, Roger
Group Art Unit	1655
Examiner Name	Gitomer, Ralph, J.

Sheet 1 of 1

Attorney Docket No: LPT-3001-UT

US PATENT DOCUMENTS					
Examiner Initials *	Cite No. ¹	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Pages,Columns,Lines,Where Relevant Passages or Relevant Figures Appear
	A1.	6,881,546	19 Apr 2005	Sabbadini	
	A2.	6,534,322	18 Mar 2003	Sabbadini	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ²
	A3.	JP 2000293181 A	Oct 2000	Hosoda et al		

[illegible]

DATE CONSIDERED